In re **Robert Charles Sterling,**
Cheryl Ann Sterling
, Debtors

Case No. **10-77844**

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community (H W J C)	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **xxxxxx8608** **Beta Finance Company, Inc.** **P.O.Box 6000** **Crown Point, IN 46308**		**J**	**1/2010** **Direct Buy Membership**				**2,214.00**
Account No. **xxxx-xxxx-xxxx-5234** **Chase** **800 Brooksedge Blv.** **Westerville, OH 43081**		**J**	**2009** **Credit card**				**4,520.19**
Account No. **xxxx-xxxx-xxxx-6584** **Chase** **800 Brooksedge Blv.** **Westerville, OH 43081**		**W**	**2007** **Credit card**				**2,572.58**
Account No. **xxxxxxxxxx7927** **Chase** **800 Brooksedge Blv.** **Westerville, OH 43081**		**J**	**2007** **Line of credit**				**4,337.63**

2 continuation sheets attached

Subtotal (Total of this page) **13,644.40**

In re **Robert Charles Sterling,**
Cheryl Ann Sterling
, Debtors

Case No. **10-77844**

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community (H W J C)	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **xxxx-x2957** **Citizens First Bancorp** **525 Water St.** **Port Huron, MI 48060**		**J**	**9/15/09** **Foreclosure on Rental Property - Glendwood Ave #512,514,516,518 Port Huron, MI**				**Unknown**
Account No. **xxxxxx5915** **Citizens First Bancorp** **525 Water St.** **Port Huron, MI 48060**		**J**	**2008** **Deed inLeiu for 1017 - 1019 Pearl Street Port Huron, MI 48060**				**Unknown**
Account No. **xxxxxxxxxxx/xxxxxx0631** **Concorde Health & Swim** **c/o National Fitness** **PO Box 497** **Layton, UT 84041-0497**		**J**	**2009** **Gym contract**				**Unknown**
Account No. **xxx-xx-xxx1 STE** **Global Connections Inc.** **5360 College Blvd.,** **#200** **Overland Park, KS 66211**		**J**	**2008** **Travel membership**				**2,092.23**
Account No. **xxxxxxxxxxxx8916** **Home Depot** **P.O.Box 653000** **Dallas, TX 75265**		**J**	**2003** **Credit card**				**1,492.32**

Sheet no. **1** of **2** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **3,584.55**

In re **Robert Charles Sterling,**
Cheryl Ann Sterling
, Debtors

Case No. **10-77844**

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community (H W J C)	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **xxxxxxxxxx6141** **Lowes** **P.O. Box 530970** **Atlanta, GA 30353**		**W**	**2007** **Credit card**				**2,393.06**
Account No. **Michigan Unemployment Insurance Agency** **P.O. Box 30004** **Lansing, MI 48909-7504**		**H**	**2009** **Alleged overpayment of Unemployment Benefits**				**24,768.00**
Account No. **xxxx8451** **Wells Fargo Financial Retail Services** **P.O.Box 660449** **Dallas, TX 75266**		**J**	**2000** **Furnace for Rental unit**				**1,313.03**
Account No.							
Account No.							

Sheet no. **2** of **2** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **28,474.09**

Total (Report on Summary of Schedules) **45,703.04**

In re **Robert Charles Sterling,**
Cheryl Ann Sterling
, Debtors

Case No. **10-77844**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES - AMENDED

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Concorde Health & Swim **44315 Gratiot Ave** **Clinton Township, MI 48036**	**Gym Memberships $40 per month for both**
Global Vacation Network **Global Connections, Inc** **PO Box 5096** **Chicago, IL 60680-5096**	**Vacation Membership**
Motor Vehicle Solutions **1278 Jungermann Road** **Suite A** **Saint Peters, MO 63376**	**Extended Warranty for Truck $141 per month for 18 months**

0 continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

Revised 11/08

UNITED STATES BANKRUPTCY COURT
Eastern District of Michigan

COVER SHEET FOR AMENDMENTS

CASE NAME: **Robert Charles Sterling**
Cheryl Ann Sterling

CASE NUMBER: **10-77844**

The enclosed documents amend the petition, schedule, statement of financial affairs, statement of income and expenses, matrix or summary of assets and liabilities.

The purpose of this amendment is to:

☐ Add creditors to schedule(s) ______. How many?___
(Use second page of this form to list creditors added).

☐ **$26.00 Amendment Fee.** This fee is required whenever you add creditors to a case, delete creditors, change the amount of a debt or change the classification of a debt. The fee is not required when correcting addresses of previously listed creditors. It is not required when new schedules are filed in a converted case.

☒ Correct the addresses of creditors already listed on the schedules and matrix previously filed. (Use second page of this form).

☒ Other: (Provide detail of Amendment) **Amended Schedules G & F, to correct creditor addresses.**

☐ **Amend Schedules and list of creditors.** Schedules must be verified by the debtor(s).

☐ **Amend Matrix.** Please do not send a matrix adding creditors to a case unless you also send the amended schedules. Do not send a new matrix to correct an address. Use the second page of this form. Pursuant to L.B.R. 1007-2 & 1009-1 an amendment to a matrix filed by a debtor without an attorney must have a complete paper copy attached to this form. Electronic filers must upload creditors to the ECF system.

NOTE: LBR 1009-1(b) requires the debtor to serve a copy of the amendment and the cover sheet for amendments on the trustee and all other entities affected by the amendment.

CORRECTIONS AND ADDITIONS TO MAILING MATRIX

Use this section of the form to make corrections to the names and address of any creditors or parties in interest who are listed on the current matrix of the case.

NAME OF CREDITOR (As it now appears): **Concorde Health & Swim**
(Please print)

Previous address:	Please change to:
44315 Gratiot Ave	**c/o National Fitness**
Clinton Township, MI 48036	**PO Box 497**
	Layton, Utah 84041-0497

NAME OF CREDITOR (As it now appears): **Global Connections Inc.**
(Please print)

Previous address:	Please change to:
PO Box 5096	**5360 College Blvd.**
Chicago, IL 60680	#200
	Overland Park, KS 66211

NAME OF CREDITOR (As it now appears): **Motor Vehicle Solutions**
(Please print)

Previous address:	Please change to:
1278 Jungermann Road	**1278 Jungermann Road**
Suite A	**Suite A**
Troy, MO 63379	**St. Peters, MO 63376**

Use this section of the form to **IDENTIFY** creditors added to the schedules and matrix.

NAME OF CREDITOR (As it now appears): ______________________
(Please print)

Address ______________________

NAME OF CREDITOR (As it now appears): ______________________
(Please print)

Address ______________________

FOR ADDITIONAL CHANGES COPY THIS SHEET AND CONTINUE

Signature: **/s/ James C. Bowser P**
James C. Bowser P 40480
Name of Attorney
413 Clinton Avenue
St. Clair, MI 48079
(810) 329-3500
ECF@bowserandassociates.com

I/We do hereby affirm under penalty of perjury that I/we have read the foregoing form, *Cover Sheet for Amendments*, and all pleadings and attachments thereto, and do hereby affirm that the information contained herein is true and accurate to the best of my knowledge, information and belief.

Signature: **/s/ Robert Charles Sterling**
Robert Charles Sterling
Name of Debtor

Signature: **/s/ Cheryl Ann Sterling**
Cheryl Ann Sterling
Name of Joint Debtor, if applicable